UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590



MAY 2 3 2011

REPLY TO THE ATTENTION OF

C-14J

**CERTIFIED MAIL**
**RETURN RECEIPT REQUESTED**

Mr. Tomas Amaya
President
Asbestek, Inc.
6811 Kennedy Avenue
Hammond, Indiana 46323

RE: Request for Information Pursuant to Section 104 of CERCLA for the Cleveland Trencher Superfund Site in Euclid, Cuyahoga County, Ohio

Dear Mr. Amaya:

This letter seeks your cooperation in providing information and documents relating to the contamination of the Cleveland Trencher Superfund Site in Euclid, Ohio ("Site"). A Superfund site is a site contaminated with high levels of hazardous substances that may present a threat to human health or the environment.

We encourage you to give this matter your immediate attention and request that you provide a complete and truthful response to this Information Request and attached questions (Attachment B) within 10 (ten) days of your receipt of this letter.

The United States Environmental Protection Agency is investigating the release or threat of release of hazardous substances, pollutants, or contaminants at the Site. The EPA is seeking to obtain information concerning the generation, storage, treatment, transportation, and methods used to dispose of such substances that have been, or threaten to be, released from the Site. The EPA will study the effects of these substances on the environment and public health. In addition, the EPA will identify activities, materials, and parties that contributed to contamination at the Site. The EPA believes that you might have information which may assist the Agency in its investigation of the Site.

Description of Legal Authority

The federal "Superfund" law (the Comprehensive Environmental Response, Compensation, and Liability Act, 42 U.S.C. § 9601, et seq., commonly referred to as "CERCLA" and "Superfund") gives the EPA the authority to, among other things: (1) assess contaminated sites, (2) determine the threats to human health and the environment posed by each site, and (3) clean up those sites in the order of the relative threats posed by each.

Information Request

Under Section 104(e)(2) of CERCLA, 42 U.S.C. § 9604(e)(2), the EPA has broad information gathering authority which allows the EPA to require persons to furnish information or documents relating to:

a) The identification, nature, and quantity of materials which have been or are generated, treated, stored, or disposed of at a vessel or facility or transported to a vessel or facility.

b) The nature or extent of a release or threatened release of a hazardous substance or pollutant or contaminant at or from a vessel or facility.

c) Information relating to the ability of a person to pay for or to perform a cleanup.

While the EPA seeks your cooperation in this investigation, compliance with the Information Request is required by law. Please note that false, fictitious, or fraudulent statements or representations may subject you to civil or criminal penalties under federal law.

Some of the information the EPA is requesting may be considered by you to be confidential. Please be aware that you may not withhold the information upon that basis. If you wish the EPA to treat the information confidentially, you must advise the EPA of that fact by following the procedures outlined in Attachment A, including the requirement for supporting your claim for confidentiality.

If you have information about other parties who may have information which may assist the Agency in its investigation of the Site or may be responsible for the contamination at the Site, that information should be submitted within the time frame noted above.

This Information Request is not subject to the approval requirements of the Paperwork Reduction Act of 1995, 44 U.S.C. § 3501 et seq.

Instructions on how to respond to the questions in Attachment B to this document are described in Attachment A. Your response to this Information Request should be mailed to:

U.S. Environmental Protection Agency
Carol Ropski
Enforcement Services Section #1, SE-5J
77 West Jackson Boulevard
Chicago, Illinois 60604-3590

If you have additional questions about the history of the Site, the nature of the environmental conditions at the Site, or the status of cleanup activities, please contact On-Scene Coordinator

Stephen Wolfe at (440) 250-1718, or Associate Regional Counsel Kevin Chow at (312) 353-6181. However, if you have specific questions about the Information Request, please contact Enforcement Specialist Carol Ropski at (312) 353-7647.

We appreciate and look forward to your prompt response to this Information Request.

Sincerely,

Connie Puchalski

Connie Puchalski, Section Chief
Office of Regional Counsel

Enclosures

Attachment A
Information Request
to Asbestek, Inc.

Instructions

1. Answer Every Question Completely. A separate response must be made to each of the questions set forth in this Information Request. For each question contained in this letter, if information responsive to this Information Request is not in your possession, custody, or control, please identify the person(s) from whom such information may be obtained.

2. Number Each Answer. Precede each answer with the corresponding number of the question and the subpart to which it responds.

3. Provide the Best Information Available. Provide responses to the best of Respondent's ability, even if the information sought was never put down in writing or if the written documents are no longer available. You should seek out responsive information from current and former employees/agents. Submission of cursory responses when other responsive information is available to the Respondent will be considered non-compliance with this Information Request.

4. Identify Sources of Answer. For each question, identify (see Definitions) all the persons and documents that you relied on in producing your answer.

5. Continuing Obligation to Provide/Correct Information. If additional information or documents responsive to this Request become known or available to you after you respond to this Request, EPA hereby requests pursuant to Section 104(e) of CERCLA that you supplement your response to EPA.

6. Confidential Information. The information requested herein must be provided even though you may contend that it includes confidential information or trade secrets. You may assert a confidentiality claim covering part or all of the information requested, pursuant to Sections 104(e)(7)(E) and (F) of CERCLA, 42 U.S.C. §§ 9604(e)(7)(E) and (F), and Section 3007(b) of the Resource Conservation and Recovery Act (RCRA), 42 U.S.C. § 6927(b), and 40 C.F.R. § 2.203(b).

If you make a claim of confidentiality for any of the information you submit to EPA, you must prove that claim. For each document or response you claim confidential, you must separately address the following points:

a) the portions of the information alleged to be entitled to confidential treatment;

b) the period of time for which confidential treatment is desired (e.g., until a certain date, until the occurrence of a specific event, or permanently);

c) measures taken by you to guard against the undesired disclosure of the information to others;

d) the extent to which the information has been disclosed to others; and the precautions taken in connection therewith;

e) pertinent confidentiality determinations, if any, by EPA or other federal agencies, and a copy of any such determinations or reference to them, if available; and

f) whether you assert that disclosure of the information would likely result in substantial harmful effects on your business' competitive position, and if so, what those harmful effects would be, why they should be viewed as substantial, and an explanation of the causal relationship between disclosure and such harmful effects.

To make a confidentiality claim, please stamp or type "confidential" on all confidential responses and any related confidential documents. Confidential portions of otherwise non-confidential documents should be clearly identified. You should indicate a date, if any, after which the information need no longer be treated as confidential. Please submit your response so that all non-confidential information, including any redacted versions of documents, is in one envelope and all materials for which you desire confidential treatment are in another envelope.

All confidentiality claims are subject to EPA verification. It is important that you satisfactorily show that you have taken reasonable measures to protect the confidentiality of the information and that you intend to continue to do so, and that it is not and has not been obtainable by legitimate means without your consent. Information covered by such claim will be disclosed by EPA only to the extent permitted by Section 104(e) of CERCLA. If no such claim accompanies the information when it is received by EPA, then it may be made available to the public by EPA without further notice to you.

7. Disclosure to EPA Contractor. Information which you submit in response to this Information Request may be disclosed by EPA to authorized representatives of the United States, pursuant to 40 C.F.R. § 2.310(h), even if you assert that all or part of it is confidential business information. Please be advised that EPA may disclose all responses to this Information Request to one or more of its private contractors for the purpose of organizing and/or analyzing the information contained in the responses to this Information Request. If you are submitting information which you assert is entitled to treatment as confidential business information, you may comment on this intended disclosure within ten (10) days of receiving this Information Request.

8. Personal Privacy Information. Personnel and medical files, and similar files, the disclosure of which to the general public may constitute an invasion of privacy, should be

segregated from your responses, included on separate sheet(s), and marked as "Personal Privacy Information."

9. Objections to Questions. If you have objections to some or all the questions within the Information Request letter, you are still required to respond to each of the questions.

Definitions

The following definitions shall apply to the following words as they appear in this Information Request.

1. The term "**arrangement**" means every separate contract or other agreement between two or more persons, whether written or oral.

2. The term "**documents**" includes any written, recorded, computer-generated, or visually or aurally reproduced material of any kind in any medium in your possession, custody, or control, or known by you to exist, including originals, all prior drafts, and all non-identical copies.

3. The term "**hazardous substance**" shall have the same definition as that contained in Section 101(14) of CERCLA, and includes any mixtures of such hazardous substances with any other substances, including mixtures of hazardous substances with petroleum products or other nonhazardous substances.

4. The term "**identify**" means, with respect to a natural person, to set forth: (a) the person's full name; (b) present or last known business and home addresses and telephone numbers; (c) present or last known employer (include full name and address) with title, position or business.

5. With respect to a corporation, partnership, or other business entity (including a sole proprietorship), the term "**identify**" means to provide its full name, address, and affiliation with the individual and/or company to whom/which this request is addressed.

6. The term "**material**" or "**materials**" shall mean any and all objects, goods, substances, or matter of any kind, including but not limited to wastes.

7. The term "**person**" shall include any individual, firm, unincorporated association, partnership, corporation, trust, or other entity.

8. The term "**pollutant or contaminant**" shall include, but not be limited to, any element, substance, compound, or mixture, including disease-causing agents, which after release into the environment will or may reasonably be anticipated to cause death, disease, behavioral abnormalities, cancer, genetic mutation, physiological malfunctions (including malfunctions in reproduction) or physical deformations; except that the term "pollutant or contaminant" shall not include petroleum.

9. The term "**real estate**" shall mean and include, but not be limited to the following: land, buildings, a house, dwelling place, condominium, cooperative apartment, office or commercial building, including those located outside the United States.

10. The term "**release**" shall mean any spilling, leaking, pumping, pouring, emitting, emptying, discharging, injecting, escaping, leaching, dumping, or disposing into the environment, including the abandonment or discharging of barrels, containers, and other closed receptacles containing any hazardous substance or pollutant or contaminant.

11. The term "**Site**" shall mean the Cleveland Trencher Superfund Site located at 20100 St. Clair Avenue, Euclid, Ohio.

12. The term "**waste**" or "**wastes**" shall mean and include trash, garbage, refuse, by-products, solid waste, hazardous waste, hazardous substances, and pollutants or contaminants, whether solid, liquid, or sludge, including but not limited to containers for temporary or permanent holding of such wastes.

13. The term "**you**" or "**Respondent**" shall mean Asbestek, Inc. The term "**you**" also includes any officer, managers, employees, contractors, trustees, successors, assigns, and agents of Asbestek, Inc.

Attachment B
Requests

1. **Identify** all **persons** consulted in the preparation of the answers to these Information Requests.

2. Identify all **documents** consulted, examined, or referred to in the preparation of the answers to these Requests, and provide copies of all such documents.

3. If **you** have reason to believe that there may be persons able to provide a more detailed or complete response to any Information Request or who may be able to provide additional responsive documents, identify such persons.

4. Provide copies of the last four income tax returns you sent to the Federal Internal Revenue Service, including all schedules.

5. If Respondent is a Corporation, respond to the following requests:

   a) Provide a copy of the Articles of Incorporation and By-Laws of the Respondent.

   b) Provide a copy of any Articles of Dissolution, any notice of administrative dissolution, or any other indication of the corporate dissolution of the Respondent.

   c) Fill out the enclosed form titled "Financial Statement for Businesses" and return the completed form to EPA.

6. Fill out questions 1-4 on the enclosed IRS Form 4506-T (Request for Transcript of Tax Return). Sign, date, and return the completed form to EPA along with your responses to the above questions.

U.S Environmental Protection Agency, Region IX

# Financial Statement for Businesses *

(If additional space is needed, attach a separate sheet)

1 Your name and address *(including zipcode and county)*

1a Business name and address *(including zipcode and county)*

2 Business phone number ( )

3 Name and address of registered agent *(including zipcode and county)*

4 *(Check appropriate box)*

- ☐ Sole proprietor
- ☐ Trust
- ☐ Partnership
- ☐ Other (specify) ____________
- ☐ Corporation

| 5. State of Incorporation (or country if foreign) | 5a Employer Identification Number | 6 Date of Incorporation | 7a Type of business<br>7b SIC Code |
|---|---|---|---|
| | | | |

8. Information about owner, partners, officers, directors, major shareholder (5% or more stock ownership), other holders of more than 5% equity interest, holders of rights to purchase more than equity interest and other persons with an ability to control

| Name and Title | Effective Date | Home Address | Social Security Number (optional) | Phone Number | Total Shares or Interest |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

## Section I General Financial Information

| 9 Last three years Federal and state income tax returns ▶ | Forms Filed | Tax Years ended | Net income before taxes |
|---|---|---|---|
| | | | |

10 Bank accounts *(List all types of accounts including checking, savings, certificates of deposit, etc )*

| Name of Institution | Address | Type of Account | Account No. | Balance |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | Total *(Enter in Item 19)* ▶ | | |

11 Bank Credit available *(Lines of credit, etc )*

| Name of Institution | Address | Credit Limit | Amount Owed | Credit Available | Monthly |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| Totals | | ▶ | | | |

12 Location, box number, and contents of all safe deposit boxes rented or accessed

* This information is requested pursuant to Section 104(e) of the Comprehensive Environmental Response, Compensation and Liability Act, 42 U S C § 9604, and is not subject to approval of the Paperwork Reduction Act of 1980, 44 U S C § 3501, et seq



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## Section I - *continued* General Financial Information

13 Real property

| | Brief Description and Type of Ownership | Address *(include county, state and parcel number)* |
|---|---|---|
| a | | |
| b | | |
| c | | |

14 Insurance policies owned with business as beneficiary

| Name Insured | Company | Policy Number | Type | Face Amount | Available Loan Value |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | Total *(Enter in Item 21)* | | | |

15 Additional Information *(Court and administrative proceedings by or against the business, settlement agreements, agreements to purchase or sell tangible or financial assets other than in the ordinary course of business, legal claims [whether asserted or not], bankruptcies, repossessions, recent transfers of assets for less than full value, anticipated increases in income, options to buy or sell real or personal property, real or personal property being purchased under contract, real or personal property being held on behalf of the business).*

15a List all subsidiaries owned, joint ventures, partnerships and other entities controlled by the business. Provide current market value of the business' interest in such subsidiary or other entity

16 Federal government departments or agencies with whom you have a contract for payment of goods or services

| Agency Name | Address | Contract No. | Amount to be Received | Payment Due Date |
|---|---|---|---|---|
| | | | | |
| | | | | |

16a Federal government departments or agencies that have extended or given the business loans, grants or assistance, or to which you have applied (or anticipate applying for any loan, grant, or assistance) in the past 5 years

| | | | | |
|---|---|---|---|---|
| | | | | |
| | | | | |

17 Accounts/Notes receivable *(Include loans to stockholders, officers, partners, etc )*

| Agency Name | Address | Amount Due | Due Date | Status |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | Total *(Enter in Item 20)* | | | |

## Section II. Asset and Liability Analysis

| Description (a) | | Cur. Mkt Value (b) | Liabilities Bal. Due (c) | Equity in Asset (d) | Amount of Mo. Pymt. (e) | Name and Address of Lien/Note Holder/Obligee (f) | Date Pledged (g) | Date of Final Pymt. (h) |
|---|---|---|---|---|---|---|---|---|
| 18 Cash on hand | | | | | | | | |
| 19 Bank accounts | | | | | | | | |
| 19a Securities and other financial assets owned | | | | | | | | |
| 20 Accounts/Notes receivable | | | | | | | | |
| 21. Insurance Loan Value | | | | | | | | |
| 22 Real property *(from item 13)* | a | | | | | | | |
| | b | | | | | | | |
| | c. | | | | | | | |
| | d | | | | | | | |
| 23 Vehicles *(Model, year, license)* | a | | | | | | | |
| | b | | | | | | | |
| | c | | | | | | | |
| 24. Machinery and equipment *(Specify)* | a | | | | | | | |
| | b | | | | | | | |
| | c | | | | | | | |
| 25 Merchandise inventory *(Specify)* | a | | | | | | | |
| | b. | | | | | | | |
| 26 Other Assets (including permits, licenses, tax loss carry forwards, agreements not to compete, other contracts) *(Specify)* | a | | | | | | | |
| | b | | | | | | | |
| | c | | | | | | | |
| | d | | | | | | | |
| 27. Other Liabilities *(Include judgements, notes, tax liens, etc.)* | a. | | | | | | | |
| | b | | | | | | | |
| | c | | | | | | | |
| | d | | | | | | | |
| | e | | | | | | | |
| 28. Federal & State Taxes Owed | | | | | | | | |
| 29 **Totals** | | | | | | | | |

## Section III. Income and Expense Analysis

| The following information applies to income and expenses during a one year period<br>__________ to __________ | Accounting method used |
|---|---|

| Income | | Expenses | |
|---|---|---|---|
| 30 Gross receipts from sales, services, etc | $ | 36 Materials purchased | $ |
| 31 Gross rental income | | 37 Wages and salaries of employees | |
| 32 Interest | | 38. Wages/salaries/bonuses for officers, directors and stockholders | |
| 33 Dividends | | 39 Rent | |
| 34 Other income *(Specify)* | | 40 Installment payments *(from line 29)* | |
| | | 41 Supplies | |
| | | 42 Utilities / Telephone | |
| | | 43 Gasoline / Oil | |
| | | 44 Repairs and maintenance | |
| | | 45 Insurance | |
| | | 46 Current taxes | |
| | | 47. Other , including fees paid for services *(Specify)* | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 35 **Total** ▶ | $ | 48 **Total** ▶ | $ |
| | | 49 **Net difference** ▶ | $ |

50. List all transferred real & personal property, including cash (by gift; by loan that was not at fair market terms, by sale for less than fair market value or made outside the normal course of business, etc.) that was made within the last 3 years (items of $3,000 ⁰⁰ or more)

| Date | Amount | Property Transferred | To Whom | Conditions of Transfer |
|---|---|---|---|---|
| | | | (Indicate any relationship to business or its partners, directors, stockholders, or other controlling persons) | |
| | | | | |
| | | | | |

### Certification

Under penalties of perjury, I declare that to the best of my knowledge and belief this statement of assets, liabilities, and other information is true, correct, and complete

| 51 Signature | 52 Print Name / Title | 53 Date |
|---|---|---|
| | | |

Form **4506-T**
(Rev. January 2011)
Department of the Treasury
Internal Revenue Service

# Request for Transcript of Tax Return

▶ **Request may be rejected if the form is incomplete or illegible.**

OMB No. 1545-1872

**Tip.** Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return.** There is a fee to get a copy of your return.

| | |
|---|---|
| **1a** Name shown on tax return. If a joint return, enter the name shown first. | **1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)** |
| **2a** If a joint return, enter spouse's name shown on tax return. | **2b Second social security number or individual taxpayer identification number if joint tax return** |

**3** Current name, address (including apt., room, or suite no.), city, state, and ZIP code (See instructions)

**4** Previous address shown on the last return filed if different from line 3 (See instructions)

**5** If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.
KEVIN CHOW, OFFICE OF REGIONAL COUNSEL, U.S. EPA, 77 W. JACKSON BLVD., CHICAGO, IL 60604
(312) 353-6181

**Caution.** *If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy.*

**6** **Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ 1040

**a** **Return Transcript,** which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . . . . ☑

**b** **Account Transcript,** which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days. . ☐

**c** **Record of Account,** which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days . . . . . . . . . . . . . . . . . . . . ☐

**7** **Verification of Nonfiling,** which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days . . ☐

**8** **Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2007, filed in 2008, will not be available from the IRS until 2009. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days . . . ☐

**Caution.** *If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.*

**9** **Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

12/31/2010 12/31/2009 12/31/2008 12/31/2007

**Signature of taxpayer(s).** I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** *For transcripts being sent to a third party, this form must be received within 120 days of signature date.*

Telephone number of taxpayer on line 1a or 2a

**Sign Here**

▶ **Signature** (see instructions) Date

▶ **Title** (if line 1a above is a corporation, partnership, estate, or trust)

▶ **Spouse's signature** Date

## General Instructions

**Purpose of form.** Use Form 4506-T to request tax return information. You can also designate a third party to receive the information. See line 5

**Tip.** Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

**Where to file.** Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. *There are two address charts:* one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different RAIVS teams, send your request to the team based on the address of your most recent return.

**Automated transcript request.** You can quickly request transcripts by using our automated self help-service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946.

### Chart for individual transcripts (Form 1040 series and Form W-2)

| *If you filed an individual return and lived in:* | *Mail or fax to the "Internal Revenue Service" at:* |
|---|---|
| Florida, Georgia (After June 30, 2011, send your transcript requests to Kansas City, MO) | RAIVS Team<br>P.O. Box 47-421<br>Stop 91<br>Doraville, GA 30362<br>770-455-2335 |
| Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U S. Virgin Islands, or A.P.O. or F.P.O. address | RAIVS Team<br>Stop 6716 AUSC<br>Austin, TX 73301<br>512-460-2272 |
| Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming | RAIVS Team<br>Stop 37106<br>Fresno, CA 93888<br>559-456-5876 |
| Arkansas, Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia | RAIVS Team<br>Stop 6705 P-6<br>Kansas City, MO<br>64999<br>816-292-6102 |

### Chart for all other transcripts

| **If you lived in or your business was in:** | **Mail or fax to the "Internal Revenue Service" at:** |
|---|---|
| Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address | RAIVS Team<br>P O Box 9941<br>Mail Stop 6734<br>Ogden, UT 84409<br>801-620-6922 |
| Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin | RAIVS Team<br>P.O. Box 145500<br>Stop 2800 F<br>Cincinnati, OH 45250<br>859-669-3592 |

**Line 1b.** Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

**Line 3.** Enter your current address. If you use a P. O. box, include it on this line.

**Line 4.** Enter the address shown on the last return filed if different from the address entered on line 3.

**Note.** If the address on Lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address.

**Line 6.** Enter only one tax form number per request.

**Signature and date.** Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected.

***Individuals.*** Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

***Corporations.*** Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

***Partnerships.*** Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

***All others.*** See Internal Revenue Code section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

**Documentation.** For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the Letters Testamentary authorizing an individual to act for an estate.

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form,** 10 min.; **Preparing the form,** 12 min.; and **Copying, assembling, and sending the form to the IRS,** 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send the form to this address. Instead, see *Where to file* on this page.